

CLAIMS ONLY				Application Number <div style="border: 1px solid black; padding: 2px; font-family: monospace; font-size: 1.5em;">10100000577</div>	Filing Date <div style="border: 1px solid black; height: 20px;"></div>
				Applicant(s) <div style="border: 1px solid black; height: 20px;"></div>	

  

* May be used for additional claims or amendments						
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
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Total Depend						
Total Claims						

  

* May be used for additional claims or amendments						
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
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